2002 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 30, 2002 8:00 am Secretary of State **DOCUMENT #** L62609 1. Entity Name SUN-JET, INC. 04-30-2002 90086 012 ***158.75 Principal Place of Business Mailing Address 10460 ROOSEVELT BLVD 10460 ROOSEVELT BLVD SUITE 160 SUITE 160 ST PETERSBURG FL 33716 ST PETERSBURG FL 33716 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3136837 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SODERBERG, BO S Street Address (P.O. Box Number is Not Acceptable) 10460 ROOSEVELT BLVD SUITE 160 ST PETERSBURG FL 33716 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **DPTS** ☐ Delete TITLE ☐ Change ☐ Addition NAME SODERBERG, BO S NAME STREET ADDRESS 10460 ROOSEVELT BLVD #160 STREET ADDRESS CITY-ST-ZIP ST PETERSBURG FL 33716 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITI F Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-7/P Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

MAME OF SIGNING OFFICER OR DIRECTOR